## IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF WISCONSIN

CHARLES WILLIAM HOOPER,

ORDER

Plaintiff,

12-cv-665-slc

DEPUTY MYERS,

v.

Defendant.

CHARLES WILLIAM HOOPER,

**ORDER** 

Plaintiff, v.

12-cv-666-slc

DEPUTY GARY PEDERSON, DEPUTY SAUNBURG, CAPTAIN CORONADO, DEPUTY GRAVES, DEPUTY NEIL NEVILLE, DEPUTY FAVE, DEPUTY TOLE and DEPUTY COOK,

Defendants.

Plaintiff Charles Hooper has submitted two proposed complaints. Plaintiff has asked for leave to proceed *in forma pauperis* and has supported his requests with affidavits of indigency. From the affidavits of indigency accompanying plaintiff's proposed complaints, I cannot determine whether he qualifies for indigent status. Plaintiff indicates that he is unemployed, has no income and does not own any vehicles or property. However, plaintiff has not explained how he pays for basic necessities such as food, clothing and shelter. Before I make a decision on whether plaintiff qualifies for indigent status, he will need to explain how his basic living needs are met in order to proceed *in forma pauperis*. To clear this up, plaintiff may have until October 8, 2012 to submit an amended affidavit of indigency that explains how he pays for food, clothing and shelter. I am enclosing a blank affidavit of indigency form to plaintiff with this order.

ORDER

IT IS ORDERED that a decision whether plaintiff Charles Hooper may proceed *in forma* pauperis in these actions are STAYED. Plaintiff may have until October 8, 2012, in which to amend his affidavit of indigency and return it to the court. If plaintiff fails to provide this requested financial information in a timely fashion, then the court will deny his request for leave to proceed *in forma pauperis* for failure to show that he is indigent.

Entered this 14th day of September, 2012.

BY THE COURT:

/s/

STEPHEN L. CROCKER Magistrate Judge

## UNITED STATES DISTRICT COURT WESTERN DISTRICT OF WISCONSIN

|            | VEDIEN   | DISTRICT OF       | 11100      | JI (DII ( |                            |
|------------|--|-------------------|------------|-----------|----------------------------|
| Charla     | . Haara  |                   |            |           |                            |
|            | es Hooper,  nme of plaintiff(s)  |                   |            |           |                            |
| 1 (411 110 | ane of plantin(s)  | C                 | ase Nos.   | 12-c      | ev-665 and 12-ev-666       |
|            |  | _                 |            |           | led by the clerk of court) |
|            | v.   |                   |            |           | ,                          |
| Donut      | y Myers,   |                   |            |           |                            |
|            | n Gary Pederson, et al.,   |                   |            |           |                            |
|            | ame of defendant(s)  |                   |            |           |                            |
|            |  |                   |            |           |                            |
|            | PETITION AN  | JD A FEIDAVI      | T TO DI    | OCEE      | <u> </u>                   |
|            | WITHOUT PREPA  |                   |            |           |                            |
|            |  | · -               |            |           |                            |
| I. Cha     | rles Hooper, declare that I am the p   | laintiff or petit | ioner in   | the abo   | ve-named action. In suppor |
|            | request to proceed in forma paupe  | -                 |            |           |                            |
|            | se proceedings and that I am entitle   |                   |            |           |                            |
|            | er the following questions truthfull   |                   | _          |           |                            |
|            | , if necessary, to provide complete  | •                 | ,          | 1 3       |                            |
|            | ,  | ,                 |            |           |                            |
| I. Per     | rsonal Information   |                   |            |           |                            |
| 1) A       |  | □ Vaa             |            | NI.       |                            |
| 1) Are     | e you currently incarcerated?  | □ Yes             | Ц          | No        |                            |
|            | If "No," go to question 2. Comp  | lete all section  | s.         |           |                            |
|            | 16.637 22 (-) (1   | -) 0 (-) -1-: 4   | . 0 - 4: - | IV. C     | (1-44 : TV 1 V/            |
|            | If "Yes," answer questions (a), (b   | (c), skip i       | o Secilo   | n IV. C   | omplete sections IV and V. |
| (a)        | State the place of your incarceration and provide your prisoner identification number: |                   |            |           |                            |
| (4)        | 1 ,  | 1                 | , 1        |           |                            |
|            | (place)  |                   |            | (n        | umber)                     |
|            | a ,  |                   |            |           | ,                          |
| (b)        | Are you employed at the instituti  | on?               | □Yes       |           | □No                        |
| (c)        | Do you receive any payment fro   | m the institution | on? □Yo    | es        | □ No                       |

If you are a prisoner, attach a printout of your prison trust account statement showing transactions for the six-month period immediately preceding the filing of your complaint, motion, or petition and showing the balance of your release account. Prisoners who are permitted to file in forma pauperis must pay the full filing fee in installments.

| Personal Information - continued   |                                    |  |                                      |                            |
|--|------------------------------------|--|--------------------------------------|----------------------------|
| 2) Are you employed?   | □Yes                               | □ No                                     |                                      |                            |
| 3) Are you currently married? If "Yes," is your spouse employed?   | □ Yes<br>□ Yes                     | □ No<br>□ No                             |                                      |                            |
| 4) Do you have any legal dependents (chi ☐ Yes ☐ No  | ldren/adults) v                    | whom you are 1                           | responsible fo                       | or supporting?             |
| If "Yes," list them below:   |                                    |  |                                      |                            |
| First and Last Initials (For Minor Children Only) or Name  | Relation                           | aship to You                             | <u>Age</u>                           | Amount of Support Provided |
| <u>omjy or reality</u>   |                                    |  | _                                    | Per Month                  |
|  |                                    |  | \$_                                  |                            |
|  |                                    |  | \$_                                  |                            |
|  |                                    |  | \$                                   |                            |
| II. <u>Income</u> - If you are married, your ans (When calculating income, you must incompensation, disability payments, life stock dividends and interest, gifts, and | clude any salary<br>insurance paym | , child support, p<br>ents, pensions, an | ublic assistance<br>nuities, worker. | e, unemployment            |
| State your total <i>monthly</i> income?  | \$                                 |  |                                      |                            |
| Provide the name of your employer(s):  |                                    |  |                                      |                            |
| State your spouse's total monthly income   | ? \$                               |  |                                      |                            |
| State the amount of money you have rece<br>(e.g., rent payments, pension or insurar<br>compensation payments). Please attach a   | nce payments,                      | gifts, inherita                          | nce, disabilit                       |                            |
| Source of income   |                                    | Ar                                       | nount                                |                            |
|  |                                    | \$ _                                     |                                      |                            |
|  |                                    | \$                                       |                                      |                            |

## III. <u>Expenses</u> - If you are married and/or have dependents, *your expenses should also include your household's expenses*.

(When calculating household expenses, you may include groceries, clothing, medical costs, utilities which are not included in your rental payments, transportation, and insurance.)

| 1) Identify the following amounts that you pay per           | month:              |                           |
|--|---------------------|---------------------------|
| ☐ Rent or ☐ Mortgage   | \$                  |                           |
| Car payment(s)   | \$                  |                           |
| Alimony and/or court-ordered child suppor                    | t \$                |                           |
| Credit card payment(s)                                       | \$                  |                           |
| 2) Do you have any other monthly expenses that yo ☐ Yes ☐ No | ou have not         | already identified?       |
| If "Yes," list them below: <u>Expense</u>                    |                     | <u>Amount</u>             |
|  | \$                  |                           |
|  | \$                  |                           |
|  | \$                  |                           |
| 3) What is the total amount of your <u>monthly</u> expen     |                     |                           |
| IV. <u>Property</u> - If you are married, your answers m     | nust <i>include</i> | your spouse's property.   |
| 1 ) Do you own a car? ☐ Yes ☐ No                             | If                  | "Yes," list car(s) below: |
| Make and Model   | Year                | Approximate Current Value |
|  |                     | \$                        |
|  |                     |                           |

| 2) Do you own your residence(s)? ☐ Yes  | □ No  |
|---|---|
| If "Yes," state the approximate value(s). \$  |   |
| What is the amount of equity (asses mortgage balance) in the residence  | ssed value of residence minus outstanding (s)? \$ |
| IV. Property - continued  |   |
| 3) Do you own any other valuable tangible propert or antiques? ☐ Yes ☐ No   |   |
| If "Yes," identify the property and approximate va  | lue(s).   |
| <u>Property</u>   | Approximate Value                                 |
|   | \$  |
|   | \$  |
|   | \$  |
| 4) Do you have any cash or checking, savings, or o  | other similar accounts?                           |
| If "Yes," state the total amount of such sums. \$   |   |
| 5) Do you own any intangible property, including b or individual retirement accounts (e.g., IRA, 401 k ☐ Yes ☐ No |   |
| If "Yes," state the nature of that property and appro   | oximate value(s).                                 |

| court to consider when reviewi | ng this petition.                           |
|--------------------------------|---|
|                                |   |
|                                |   |
|                                |   |
|                                |   |
|                                |   |
|                                |   |
|                                |   |
|                                |   |
|                                |   |
| Date                           | Signature - Signed Under Penalty of Perjury |